

100 34-072302

PTO/SB/01 (10-01)

Approved for Use through 10/31/2002. OMB 0851-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration
Submitted
with Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

1795

First Named Inventor

KOBYLECKI, Ryszard

COMPLETE IF KNOWN

Application Number

10/018,034

Filing Date

04/09/2001

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

INVESTIGATING DIFFERENT PHYSICAL AND/OR CHEMICAL FORMS OF MATERIALS

(Title of the invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

04/09/2001

as United States Application Number or PCT International

Application Number

PCT/GB01/01593

and was amended on (MM/DD/YYYY)

(If applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
0008563.9	GB	04/07/2000	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

1001 04 072302

PTO/SB/01 (10-01)

Approved for use through 10/31/2002, OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1985, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/>		Customer Number or Bar Code Label		24264		OR <input type="checkbox"/> Correspondence address below	
Name							
Address							
City				State		ZIP	
Country				Telephone		Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR: <input type="checkbox"/>				A petition has been filed for this unsigned inventor			
Given Name <u>Ryszard</u> (first and middle [if any])				Family Name <u>KOBYLECKI</u> or Surname			
Inventor's Signature <u>R. Kobylecki</u>				Date <u>5 March 2002</u>			
Residence: City		State		GB Country		GB Citizenship	
<u>8 Cross Green, Wicken, Ely, Cambridgeshire CB7 5XS</u>							
Mailing Address							
City		State		ZIP		GB Country	
NAME OF SECOND INVENTOR: <input type="checkbox"/>				A petition has been filed for this unsigned inventor			
Given Name <u>Daniel</u> (first and middle [if any])				Family Name <u>COWELL</u> or Surname			
Inventor's Signature				Date			
Residence: City		State		GB Country		GB Citizenship	
<u>241 Coldhams Lane, Cambridge CB1 3HY</u>							
Mailing Address							
City		State		ZIP		GB Country	
<input checked="" type="checkbox"/> Additional Inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

1001 44 072302

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: ☒Customer Number
or Bar Code Label

24264

OR ☐

Correspondence address below

Name

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventorGiven Name Ryszard
(first and middle [if any])Family Name KOBYLECKI
or SurnameInventor's
Signature

Date

Residence: City

State

GB
CountryGB
Citizenship

BCross Green, Wicken, Ely, Cambridgeshire CB7 5XS

Mailing Address

City

State

ZIP

GB
Country

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventorGiven Name Daniel
(first and middle [if any])Family Name COWELL
or SurnameInventor's
Signature

Date

28th March 2002

Residence: City

State

GB
CountryGB
Citizenship

241 Coldhams Lane, Cambridge CB1 3HY

Mailing Address

City

State

ZIP

GB
Country☒ Additional Inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

PTO/SB/02A (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
3-6 Vassilis		STYLIANOPOULOS	
Given Name		Family Name or Surname	
Inventor's Signature X <i>[Signature]</i>		Date X 13 MAR 2002	
Residence: City		State	GB Country
Mailing Address		GB Citizenship	
5 Paxton Close, Cottenham, Cambridge CB4 8XP <i>[Signature]</i>			
Mailing Address			
City		State	ZIP
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Country
Mailing Address		Citizenship	
Mailing Address			
City		State	ZIP
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Country
Mailing Address		Citizenship	
Mailing Address			
City		State	ZIP
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Country
Mailing Address		Citizenship	
Mailing Address			
City		State	ZIP

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS; SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.